



Supplemental Application Data Sheet

Application Information

Application Number::	10/813,747
Filing Date::	03/29/04
Application Type::	Regular
Subject Matter::	Utility
CD-ROM or CD-R?::	None
Title::	MESENCHYMAL PRECURSOR CELL
Attorney Docket Number::	A20-033CIP
Request for Early Publication?::	No
Request for Non-Publication?::	No
Total Drawing Sheets::	28
Small Entity?::	Yes
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

Applicant Information

Applicant Authority type::	Inventor
Primary Citizenship Country::	AU
Status::	Full Capacity
Given Name::	Paul
Family Name::	SIMMONS
City of Residence::	Kew
State or Province of Residence::	Victoria

Country of Residence::	AU
Street of mailing address::	Human Stem Cell Laboratory, Peter MacCallum Cancer Institute, Level 1 Research, St. Andrews Pl.
City of mailing address::	East Melbourne
State or Province of mailing address::	Victoria
Country of mailing address::	AU
Postal or Zip Code of mailing address::	3002

Applicant Information

Applicant Authority type::	Inventor
Primary Citizenship Country::	AU
Status::	Full Capacity
Given Name::	Andrew
Family Name::	ZANNETTINO
City of Residence::	Highbury
State or Province of Residence::	South Australia
Country of Residence::	AU
Street of mailing address::	Hanson Centre for Cancer Research, Institute of Medical and Veterinary Science, Frome Rd.
City of mailing address::	Adelaide
State or Province of mailing address::	South Australia
Country of mailing address::	AU
Postal or Zip Code of mailing address::	5000

Applicant Information

Applicant Authority type::	Inventor
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Primary Citizenship Country::	AU
Status::	Full Capacity
Given Name::	Stan
Family Name::	GRONTHOS
City of Residence::	Colonial Light Gardens
State or Province of Residence::	South Australia
Country of Residence::	AU
Street of mailing address::	Craniofacial and Skeletal Disease Branch, Institute of Dental and Craniofacial Research, National Institute of Health
City of mailing address::	Bethesda
State or Province of mailing address::	MD
Country of mailing address::	US
Postal or Zip Code of mailing address::	20892-4320

Correspondence Information

Name:	Henry D. Coleman
Street of mailing address::	714 Colorado Avenue
City of mailing address::	Bridgeport
State or Province of mailing address::	Connecticut
Country of mailing address::	USA
Postal or Zip Code of mailing address::	06605-1601
Phone number::	(203) 366-3560
Fax Number::	(203) 335-6899
E-Mail address::	cosud@erols.com

Representative Information

Representative Customer Number::	28156	
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Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation-in-part of	10/030,411	04/11/02
10/030,411	National Stage of	PCT/AU00/00822	07/07/00

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
AU	PQ 1477	07/07/99	Yes
AU	2003-901668	03/28/03	Yes

Assignment Information

Assignee name:: MEDVET SCIENCE PTY LTD

Street of mailing address:: 33 Dalglish St.

City of mailing address:: Thebarton

State or Province of mailing address:: South Australia

Country of mailing address:: AU

Postal or Zip Code of mailing address:: 5031